

Abstract

Preventing Child Maltreatment through Group and Individual Services

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INTRODUCTION: SafeCare is an evidence-based home visitation program that has been shown to reduce child maltreatment among families with a history of maltreatment or with risk factors for maltreatment. Currently, SafeCare is implemented on an individual basis where providers visit parents in their home. The current study and possible future studies seek to evaluate the utility and feasibility of SafeCare services delivered in a group-based setting.

METHOD: The current study is a pilot-study to test the feasibility of implementing SafeCare protocol in a group-based setting. This study consisted of 40 families with children age 0-5 years and were residence of rural areas of Georgia. Parents completed a Protective Factors Survey at the onset and conclusion of services; SafeCare providers also completed assessments of parents' skills at the beginning and ending of each module. SafeCare modules are designed to address three parenting areas associated with neglect and physical abuse: parent-child/infant interaction, health, and safety. The parent-child/infant interaction module focus on enhancing positive interactions while decreasing the potential for coercive parent-child/infant interactions that can lead to physical abuse. The health module improves parents' knowledge of their child health needs; this reduces the chance of medical neglect. Lastly, the safety module teaches parents how to make their homes safer along with emphasizing the importance of parental supervision.

IMPORTANCE: Implementing evidence-based programs represent a major strategy for addressing the persistent occurrence of child abuse and neglect. There are challenges, along with higher costs, of implementing services in rural areas that have limited resources and diffused areas. Implementing SafeCare in a group-based setting provide greater reach and overall public health impact by allowing providers to service more families while cutting costs.

DISCUSSION/CONCLUSION: Providers were able to serve similar number of families while cutting costs and provider demand. Future studies that will focus on overcoming barriers of providing services to populations with limited resources and populations in rural areas and which individuals would benefit from SafeCare in an individual or group-based settings.

Keywords: SafeCare, maltreatment, neglect, abuse